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AVENTIS US PAT DEPT(S) TRANSMITTAL

NO. 0080 P. 2

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05487 7590 08/30/2005

ROSS J. OEHLER
AVENTIS PHARMACEUTICALS INC.
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MAIL CODE: D303A
BRIDGEWATER, NJ 08807

11/30/2005 TBESHAH2 00000017 181982 10035783

01 FC:2501 700.00 DA

02 FC:1504 300.00 DA

03 FC:1400 151.00 DA

10/035,783

12/24/2001

FIRST NAMED INVENTOR

Michael Graupe

ATTORNEY DOCKET NO.

1016US

CONFIRMATION NO.

3968

TITLE OF INVENTION: NOVEL COMPOUNDS AND COMPOSITIONS AS CATHEPSIN INHIBITORS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	11/30/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
SHIAO, REI TSANG	1626	514-233500			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 JOSEPH A. ROSSI

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

AVENTIS PHARMACEUTICALS INC.
AXYS PHARMACEUTICALS, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

BRIDGEWATER, NEW JERSEY
SOUTH SAN FRANCISCO, CALIFORNIA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 5 x \$3.00 = \$15.00

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- ☐ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized by check the required fee(s), or credit any overpayment, to Deposit Account Number 18-1982 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

Joseph D. Rossi
JOSEPH D. ROSSI

Date

11-29-05

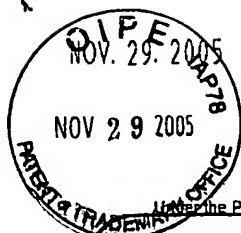
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47,038

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AVENTIS US PAT DEPT

NO. 0080 P. 1

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0851-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/035,783	
	Filing Date	December 24, 2001	
	First Named Inventor	Michael GRAUPE et al.	
	Art Unit	1626	
	Examiner Name	SHIAO, Rei Tsang	
Total Number of Pages in This Submission	2	Attorney Docket Number	USAV2001/0081 US NP

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD. Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">1. Issue Fee</div>
<div style="border: 1px solid black; padding: 5px;">Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	AVENTIS PHARMACEUTICALS INC.		
Signature			
Printed name	Joseph ROSSI		
Date	November 29, 2005	Reg. No.	47038

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: (USPTO FAX NO. 571-273-2885; Total No. of Pages Transmitted: 2)			
Signature			
Typed or printed name	Paul Irvine	Date	November 29, 2005

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